

Fill in this information to identify your case:

Debtor 1	Karlton	Avery	Maydwell
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	DeShawn	Nicole	Maydwell
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known)	19-32994-SGJ-7		

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** claims and Part 2 for creditors with **NONPRIORITY** claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	\$13,700.00	\$13,700.00	\$0.00

Attorney General of Texas
Priority Creditor's Name
CSD Region 9
Number Street
2001 Beach Street, Suit 700

Fort Worth TX 76103
City State ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:
☒ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 1: Your PRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

	Total claim	Priority amount	Nonpriority amount
2.2	\$3,800.00	\$3,800.00	\$0.00

Internal Revenue Service

Priority Creditor's Name

Department of the Treasury

Number Street

P.O. Box 7346

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Philadelphia**PA****19101-7346**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim**\$868.42**

4.1

Baylor Med Ctr-Sunnyvale

Nonpriority Creditor's Name

c/o Creditors Bankruptcy Service

Number Street

P.O. Box 800849**Dallas****TX****75380**

City

State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **4 7 1 3****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical Bill

4.2

Baylor Med Ctr-Sunnyvale

Nonpriority Creditor's Name

c/o Creditors Bankruptcy Service

Number Street

P.O. Box 800849**Dallas****TX****75380**

City

State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9 1 9 9****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical Bill

\$52.66

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$429.00****4.3****Caine & Weiner**

Nonpriority Creditor's Name

12005 Ford Road

Number Street

Dallas

City

TX

State

75234

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **2 4 8 9**When was the debt incurred? **02/15/2016****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Enterprise Rent a Car**\$1,928.00****4.4****Capital One Bank (USA), N.A.**

Nonpriority Creditor's Name

4515 N Santa Fe Ave

Number Street

Oklahoma City

City

OK

State

73118

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **2 3 3 2**When was the debt incurred? **08/22/2015****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Debt**\$1,146.00****4.5****CBE Group**

Nonpriority Creditor's Name

4140 Kimball Ave.

Number Street

Waterloo

City

IA

State

50701

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **3 7 4 9**When was the debt incurred? **06/01/2018****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Charter Communications

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$115.00****4.6****City of Dallas**

Nonpriority Creditor's Name

C/O City Secretary's Office

Number Street

Dallas City Hall**1500 Marilla Street, Room 5D South****Dallas TX 75201-6390**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0 3 5 2**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Debt**\$361.00****4.7****Credit Systems International, Inc.**

Nonpriority Creditor's Name

1277 Country Club Lane

Number Street

Fort Worth TX 76112

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **6 9 0 2**When was the debt incurred? **07/14/2016**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Medical Debt**\$265.00****4.8****Enhanced Recovery Company**

Nonpriority Creditor's Name

8014 Bayberry Road

Number Street

Jacksonville FL 32256

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **7 9 0 2**When was the debt incurred? **12/08/2017**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Charter Communications

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$76,290.00****4.9****Federal Loan Servicing**

Nonpriority Creditor's Name

P.O. Box 69184

Number Street

Harrisburg**PA****17106**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0 0 0 8**When was the debt incurred? **03/06/2015****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.10**First Premier Bank**

Nonpriority Creditor's Name

PO Box 5524

Number Street

Sioux Falls**SD****57117**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **6 1 0 8**When was the debt incurred? **11/18/2015****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Debt**\$847.00****4.11****First Premier Bank**

Nonpriority Creditor's Name

PO Box 5524

Number Street

Sioux Falls**SD****57117**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0 0 7 8**When was the debt incurred? **10/17/2014****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Debt**\$458.00**

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.12****\$832.00****Linebarger Goggan Blair & Sampson, LLP**

Nonpriority Creditor's Name

900 Arion Parkway, Suite 104

Number Street

San Antonio**TX****78216**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.13**\$2,644.20****Linebarger Goggan Blair & Sampson, LLP**

Nonpriority Creditor's Name

900 Arion Parkway, Suite 104

Number Street

San Antonio**TX****78216**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.14**\$221.00****LVNV Funding LLC its successors and assi**

Nonpriority Creditor's Name

c/o Resurgent Capital Services

Number Street

P.O. Box 10587**Greenville****SC****29603-0587**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **3 8 4 0****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer DebtLast 4 digits of account number **3 3 0 2****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer DebtLast 4 digits of account number **5 0 1 7****When was the debt incurred?** **04/28/2016****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Webbank Fingerhut

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$315.00****4.15****Midwest Recovery Systems**

Nonpriority Creditor's Name

PO Box 899

Number Street

Florissant**MO 63032**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.16**National Credit Adjusters, LLC**

Nonpriority Creditor's Name

Attn: Bankruptcy Department

Number Street

P.O. Box 3023**Hutchinson, K.S. 67504**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.17**Navy Federal Credit Union**

Nonpriority Creditor's Name

PO Box 3000

Number Street

Merrifield**VA 22119**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **3 9 3 7**When was the debt incurred? **03/28/2016****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Six Flags over TexasLast 4 digits of account number **8 7 0 6**When was the debt incurred? **09/21/2017****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Cash Store

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Notice Only**\$0.00**

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.18****\$49.00****Neighborhood Credit Union**

Nonpriority Creditor's Name
13651 Montfort Drive
 Number Street

Dallas TX 75240
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0 0 3 2**When was the debt incurred? **09/05/2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Debt**4.19****\$296.31****One Advantage, LLC**

Nonpriority Creditor's Name
1232 W. State Rd 2
 Number Street

La Porte IN 46350
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **6 5 5 1**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Texas Health**4.20****\$100.00****Pendrick Capital Partners, LLC**

Nonpriority Creditor's Name
c/o Peritus Portfolio Services II, LLC
 Number Street
PO Box 141419

Irving TX 75014
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **3 6 0 7**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bill

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.21****\$401.10****Phoenix Asset Group, LLC**

Nonpriority Creditor's Name

16526 W. 78th Street, Suite 353

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Cottonwood Financial**Eden Prairie****MN****55317**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.22**\$0.00****Phoenix Financial Services, LLC**

Nonpriority Creditor's Name

PO Box 361450

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Pendrick Capital Partners II**Indianapolis****IN****46236**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.23**\$151.00****Phoenix Recovery Group**

Nonpriority Creditor's Name

1045 Cheever Blvd.

Number Street

Suite 204

Last 4 digits of account number

When was the debt incurred? **01/22/2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Sunset Point**San Antonio****TX****78217**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$3,840.00****4.24****Professional Debt Mediation, Inc.**

Nonpriority Creditor's Name

7948 Baymeadows Way

Number Street

2nd Floor**Jacksonville****FL 32256**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.25**Radiology Partners Dallas**

Nonpriority Creditor's Name

P.O. Box 205214

Number Street

Dallas**TX 75320**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.26**Ray Hubbard Emergency Physicians, PLLC**

Nonpriority Creditor's Name

13737 Noel Road, Ste. 1600

Number Street

Dallas**TX 75240-1311**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0 1 7 5**When was the debt incurred? **12/05/2016****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Brookside AptsLast 4 digits of account number **5 6 2 1**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical BillLast 4 digits of account number **4 7 1 3**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bill**\$1,584.00**

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$1,250.00****4.27****Resource One Credit Union**

Nonpriority Creditor's Name

P.O. Box 660077

Number Street

Dallas TX 75266-0077

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.28**Southwest Credit Systems**

Nonpriority Creditor's Name

4120 International Parkway

Number Street

Ste 1100**Carrollton TX 75007**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.29**TrueGreen #5420**

Nonpriority Creditor's Name

4908 Olson

Number Street

Dallas TX 75227

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Debt

Last 4 digits of account number

0 8 4 3**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Time Warner Cable

Last 4 digits of account number

1 5 9 6**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Debt**\$108.14**

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$6,721.00****4.30****US Department of Education**

Nonpriority Creditor's Name

Claims Filing Unit

Number Street

PO Box 8973**Madison****WI****53708-8973**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **4 4 9 5**When was the debt incurred? **02/05/2015****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.31**US Department of Education**

Nonpriority Creditor's Name

Claims Filing Unit

Number Street

PO Box 8973**Madison****WI****53708-8973**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **2 0 6 0**When was the debt incurred? **02/05/2015****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

\$5,024.00**4.32****UT Southwestern Medical Center**

Nonpriority Creditor's Name

Account Resolutions Dept

Number Street

PO Box 848009**Dallas****TX****75284-8009**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **8 6 4 0**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical Bill

\$586.76

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

AT&T Moblity II, LLC

Name

One AT&T Way

Number Street

Room 3a104

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Bedminster**NJ****07921**

City

State

ZIP Code

Baylor Scott & White Medical Center

Name

3500 Gaston Ave.

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Dallas**TX****75246**

City

State

ZIP Code

Brookside Apts

Name

2505 Thomason Circle

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Arlington**TX****76006**

City

State

ZIP Code

Charter Communications, Inc.

Name

400 Atlantic Street

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Stamford**CT****06901**

City

State

ZIP Code

Charter Communications, Inc.

Name

400 Atlantic Street

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Stamford**CT****06901**

City

State

ZIP Code

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Chase Bank**

Name
P.O. Box 15368
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Wilmington **DE** **19850**
 City State ZIP Code

Last 4 digits of account number _ _ _ _

City of Arlington

Name
Mail Stop 63-0100
 Number Street
P.O. Box 90403

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Arlington **TX** **76004**
 City State ZIP Code

Last 4 digits of account number _ _ _ _

Clay Cooley Motor Company

Name
1251 E. Airport Freeway
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Irving **TX** **75062**
 City State ZIP Code

Last 4 digits of account number 2 7 7 9**Cottonwood Financial Texas, LLC**

Name
a/k/a The Cash Store
 Number Street
1901 Gateway Drive

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Suite 200

Irving **TX** **75038**
 City State ZIP Code

Last 4 digits of account number _ _ _ _

Debt Recovery Solutions LLC

Name
900 Merchants Concourse
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Syosset **NY** **11791**
 City State ZIP Code

Last 4 digits of account number _ _ _ _

Enterprise Rent A Car

Name
4600 McAuley PI
 Number Street
Suite 510

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Montgomery **OH** **45242**
 City State ZIP Code

Last 4 digits of account number _ _ _ _

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****McLennan County JP Pct 3**

Name

Hon. David W. Pareya

Number Street

P.O. Box 495

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

West**TX****76691**

City

State

ZIP Code

Mesquite Water

Name

P.O. Box 850287

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Mesquite**TX****75185**

City

State

ZIP Code

Pendrick Capital Partners, LLC

Name

c/o Peritus Portfolio Services II, LLC

Number Street

PO Box 141419

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Irving**TX****75014**

City

State

ZIP Code

Six Flags Over Texas

Name

Steve Martindale, Park President

Number Street

2201 Road to Six Flags

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Arlington**TX****76010**

City

State

ZIP Code

Starla Wiley

Name

2115 Kingston

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Bullhead City**AZ****86442**

City

State

ZIP Code

T Mobile/T-Mobile USA Inc

Name

by American InfoSource LP as agent

Number Street

PO Box 248848

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Oklahoma City**OK****73124-8848**

City

State

ZIP Code

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Texas Health Resources**

Name

500 E Border St # 122

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Arlington**TX****76010**

City

State

ZIP Code

Texas Health Resources

Name

500 E Border St # 122

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Arlington**TX****76010**

City

State

ZIP Code

Texas Health Resources

Name

500 E Border St # 122

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Arlington**TX****76010**

City

State

ZIP Code

Time Warner Cable

Name

One Time Warner Center

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

New York**NY****10019-8016**

City

State

ZIP Code

Transworld Systems

Name

PO Box 17221

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.29** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Wilmington**DE****19850**

City

State

ZIP Code

Transworld Systems Inc.

Name

2135 E. Primrose, Suite Q

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.29** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Springfield**MO****65804**

City

State

ZIP Code

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7****Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****TXU Energy**

Name

c/o Bankruptcy Department

Number Street

PO Box 650393

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Dallas

City

TX

State

75265

ZIP Code

Webbank (Fingerhut)

Name

P.O. Box 1250

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Saint Cloud

City

MN

State

56395

ZIP Code

Wells Fargo Card Services

Name

PO Box 10438; MAC F8235-02F

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims**Consumer Debt**☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Des Moines

City

IA

State

50306-0438

ZIP Code

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7**

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$13,700.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$3,800.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$17,500.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$88,035.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$20,007.96</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$108,042.96</u>

Fill in this information to identify your case:

Debtor 1	Karlton	Avery	Maydwell
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	DeShawn	Nicole	Maydwell
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known)	19-32994-SGJ-7		

☒ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets**Your assets**

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)1a. Copy line 55, Total real estate, from Schedule A/B..... **\$0.00**1b. Copy line 62, Total personal property, from Schedule A/B..... **\$10,849.00**1c. Copy line 63, Total of all property on Schedule A/B..... **\$10,849.00****Part 2: Summarize Your Liabilities****Your liabilities**

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$0.00**3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$17,500.00**3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + **\$108,042.96**

Your total liabilities

\$125,542.96**Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)Copy your combined monthly income from line 12 of Schedule I..... **\$4,165.20**5. *Schedule J: Your Expenses* (Official Form 106J)Copy your monthly expenses from line 22c of Schedule J..... **\$4,129.00**

Debtor 1 **Karlton Avery Maydwell**
 Debtor 2 **DeShawn Nicole Maydwell**

Case number (if known) **19-32994-SGJ-7**

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$5,331.13

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations. (Copy line 6a.)	<u>\$13,700.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$3,800.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$88,035.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ <u>\$0.00</u>
9g. Total. Add lines 9a through 9f.	<div style="border: 2px solid black; padding: 2px;"><u>\$105,535.00</u></div>

Fill in this information to identify your case:

Debtor 1	Karlton	Avery	Maydwell
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	DeShawn	Nicole	Maydwell
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known)	19-32994-SGJ-7		

☒ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Karlton Avery Maydwell _____

Karlton Avery Maydwell, Debtor 1

Date **10/08/2019**
MM / DD / YYYY

X /s/ DeShawn Nicole Maydwell _____

DeShawn Nicole Maydwell, Debtor 2

Date **10/08/2019**
MM / DD / YYYY